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23598

7590

11/07/2005

**BOYLE FREDRICKSON NEWHOLM STEIN & GRATZ,**  
**S.C.**  
**250 E. WISCONSIN AVENUE**  
**SUITE 1030**  
**MILWAUKEE, WI 53202**

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Jean A. Jordan	(Depositor's name)
Jean A. Jordan	(Signature)
2-6-06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/575,641	09/30/2003	Andrew J. Wanie	845.001	6077

TITLE OF INVENTION: WATER SOFTENER MONITORING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	02/07/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
STONE, JENNIFER A	2636	340-618000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member one or more registered attorneys or agents) and the names of 2 registered patent attorneys or agents. If no name listed, no name will be printed.

**Boyle Fredrickson Newholm**  
**Stein & Gratz S.C.**  
**250 Plaza, Suite 1030**  
**250 East Wisconsin Avenue**  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

02/08/2006 MBIZUNE2 00000049 10675641

01 FC:2501	700.00 OP
02 FC:1504	300.00 OP
03 FC:8001	15.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date

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Registration No.

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